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HEADLINE: Doctors and scientists in the anti-**smoking** crusade stub out the facts

BODY:

It appears that Dr. Lonnie R. Bristow, president of the American Medical Association (AMA), has misrepresented the **Congressional Research Service** (CRS) report on environmental tobacco **smoke** (ETS) by cherry-picking quotes from the report which, when taken out of context, seem to advance the AMA's anti-**smoking** agenda ("Being near a lit cigarette has risks -whether you're **smoking** it or not," Letters, Feb. 2).

Dr. Bristow claims that the "CRS arrives at risk estimates almost identical to those of the [Environmental Protection Agency (EPA)]: about 2,800 lung cancer deaths per year among non-**smokers** from ETS, compared with EPA's estimate of 3,300."

On the contrary, the CRS did not arrive at any definitive risk estimate. Dr. Bristow doesn't tell the whole story. The CRS report simply cites the "2,800" estimate based on the 1994 study done by Elizabeth Fontham et al., which was published in the Journal of the American Medical Association. That citation in the CRS report is closely followed by the statement, "Data from the Brownson study, on the other hand, produce no annual lung cancer deaths from ETS . . ." That passage refers to the 1992 study done by Ross Brownson et al., published in the American Journal of Public Health.

The Fontham and Brownson studies were among four new studies published after the release of the 1992 EPA report. These new studies "did not," according to the CRS report, "clarify the existence of a risk." "Indeed," says the CRS, the new studies "complicated the interpretation of the evidence, since the two largest U.S. studies -Fontham and Brownson - found in one case a positive risk that was barely statistically significant and the other no risk at all."

Dr. Bristow further claims that the CRS authors "admit" that even if there is a threshold (a safe level of exposure), "public health officials may still choose to use a model closer to the non-threshold approach [i.e., **smoking** bans] in order to ensure that all populations are protected." This statement was not attributed to the CRS authors, as indicated by Dr. Bristow. It was attributed to Steven Bayard, the EPA official responsible for EPA's report, and is duly noted as such in the CRS report.

What the CRS does say is that "if there are any lung cancer deaths from ETS exposure, they are likely to be concentrated among those subjected to the

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[highest] exposure levels . . . primarily among those non-**smokers** subjected to significant spousal ETS" (as opposed to workplace exposure). Even then, the CRS found the reported risks to be "subject to uncertainty."

In effect, the CRS demolishes the very foundation of the EPA's hypothesis that ETS is a lung cancer hazard solely on the theory that ETS is chemically similar to the **smoke** that active **smokers** inhale. This hypothesis is not proven, says the CRS, since "ETS is substantially diluted and aged compared to even low levels of active **smoking**."

Dr. Bristow's apparent attempt to alarm and deceive the public with selective and misleading quotes from the CRS report should force us to re-examine any notions that we may have had that all doctors and scientists involved in the crusade against tobacco are saintly souls dedicated to reporting the facts in an objective and honest manner.

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